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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS

Application Number	10/672,961
Filing Date	09-26-2003
First Named Inventor	LEEDY
Art Unit	2822
Examiner Name	LEWIS, MONICA
Attorney Docket Number	ELM-2 CONT. 4

I hereby revoke all previous powers of attorney given in the above-identified application.		
A Power of Attorney is submitted herewith.		
OR	00000	
I hereby appoint the practitioners associated with the	20232	
Thereby appoint the practitioners associated with the customer remove.		
Please change the correspondence address for the above-identified application to:		
✓ The address associated with 30232		
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I am the:		
Applicant/Inventor.		
Assignee of record of the entire interest. See 37 CFR 3.71.		
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)		
SIGNATURE of Applicant or Assignee of Record		
Signature Cent Leed		
Name Glenn J. Leedy	L. T. L. Posesser	
Date 06-10-2008	Telephone 734-944-1570	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.		
*Total offorms are submitted.		

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